

(Whereupon, at 12 o'clock noon, a recess was taken until 12:30 p.m., the same day.)

AFTERNOON SESSION

Senator NELSON. We will reopen the hearings now with Dr. Donal Magee, chairman of the Department of Physiology and Pharmacology at Creighton University Medical School in Omaha.

Dr. Magee, we appreciate very much your taking the time to come here and testify before the committee. You may proceed to offer your testimony in any way most convenient to you, by reading or extemporizing, and if you don't mind we may interrupt for questions as they occur. I see your opening statement mentions your professional credentials, so you just go ahead and present it in any way you like.

STATEMENT OF DR. DONAL F. MAGEE, CHAIRMAN, DEPARTMENT OF PHYSIOLOGY AND PHARMACOLOGY, CREIGHTON UNIVERSITY MEDICAL SCHOOL, OMAHA, NEBR.

Dr. MAGEE. I might add in addition to the opening statement that I teach. I don't practice medicine, and I don't buy drugs except as a patient.

I am Donal F. Magee, chairman of the department of physiology and pharmacology at Creighton University Medical School, Omaha. I have a degree in medicine from Oxford University earned in 1948 and a Ph. D. in physiology from the University of Illinois earned in 1951. From then until 1965 I was on the staff of the Department of Pharmacology at the University of Washington, Seattle.

In teaching pharmacology to medical students, keeping up to date with new products is a major problem. Every teacher is required to teach branches of the subject in which he has no immediate research interest and must, therefore, have recourse to the published literature and advertising. For new products this is difficult. Every teacher must assess the worth of the product; that is, is it worth mentioning at all, should it be condemned, criticized, or favored. In my opinion, a new product to justify itself must treat an ailment against which no other agent is effective or it must treat an ailment better than any existing therapy. If it meets neither of these criteria it must be less toxic than existing drugs or be easier to administer and, finally, if it is equal in all these respects to existing agents, it must be cheaper. Such comparative information is almost impossible to obtain even for pharmacologists who have the training and time to search for it. It is not obtained from company advertising, despite its improvement over the last few years, and only rarely is it obtained from detail men.

In the past, in response to requests to detail men and companies, I have only once received information which could be used in a lecture. One would imagine that it would be in the interest of drug manufacturers to keep the teaching pharmacologist informed of the therapeutic and pharmacological reasons for the production of a new drug, but this has not been my experience. My judgment of advertising material is that its purpose is to make a name known or to develop in the mind of the reader an enduring relationship between a name and a certain symptom complex or disease.